SUBSTANCE ABUSE TREATMENT FACT SHEET

Massachusetts Department of Public Health, Bureau of Substance Abuse Services February, 2002

This fact sheet contains information about the impact of alcohol and other drug use in the Berkshire, Hampden, Hampshire, and Franklin Senatorial District. Admission data were reported to the Bureau of Substance Abuse Services (BSAS) Substance Abuse Management Information System in FY 2001.

Residents of Berkshire, Hampden, Hampshire, and Franklin Senatorial District

Treatment Admissions:

In FY 2001, there were 120,687 admissions to licensed substance abuse treatment services in all of Massachusetts. Of these, 3.1% (3,771) reside in the Berkshire, Hampden, Hampshire, and Franklin Senatorial District. Due to budget cuts in FY 2002, BSAS estimates that 19% (716) of Berkshire, Hampden, Hampshire, and Franklin Senatorial District residents will not be able to access treatment services. Please note that these statistics represent only individual admissions, and represent a figure lower than the actual number of constituents in need of treatment services.

- In FY 2001, 71.4% of admissions from the Berkshire, Hampden, Hampshire, and Franklin Senatorial District were male and 28.6% were female.
- Over 57.1% of admissions were between the ages of 30-49.
- 88.4% of admissions were white non-Latino, 6.1% were black non-Latino, 3.2% were Latino, 0.1% were Asians, and 2.1% were other racial categories.
- 55.4% of those admitted to treatment were never married, 15.4% were married, and 19.7% reported not to be married now.
- 25.7% of admissions had less than high school education, 48.7% completed high school, and 25.7% had more than high school education.
- 38.1% of those admitted to treatment were employed.
- 12.6% of those admitted were homeless.
- 21.9% of admissions had prior mental health treatment.

Substances Used in Past Year:

Upon entering treatment, each client is asked to report ALL substances used in the past year (12 months) prior to admission. Admissions frequently report using more than one substance within the year. The use of more than one psychoactive substance, such as alcohol and marijuana, is referred to as 'polydrug' or 'polysubstance' use. For example, individuals who use cocaine, crack and heroin also may report the use of either alcohol and/or marijuana.

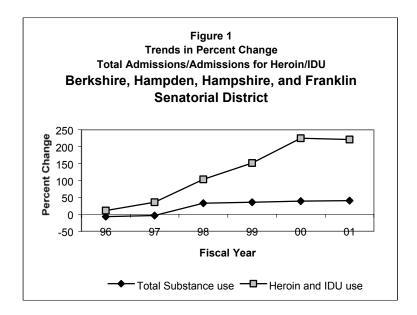
• Table 1 shows ALL substances which clients reported using in the year prior to admission, including the prevalence of injection drug use (IDU) in the Berkshire, Hampden, Hampshire, and Franklin Senatorial District. Injection drug users (or IDU's) are individuals who use a needle to ingest cocaine, crack, heroin or another drug to get high.

Table 1 Annual Admissions by Substance Used FY 1995 – FY 2001																				
											Berkshire, Hampden, Hampshire, and Franklin Senatorial District									
												Total	Alcohol	Marijuana	Cocaine	Crack	Heroin	IDU		
FY '95	2,683	2,404	928	470	645	195	135													
FY '96	2,511	2,216	941	392	568	221	147													
FY '97	2,597	2,277	889	457	480	278	171													
FY '98	3,573	3,055	1,271	608	743	424	248													
FY '99	3,650	3,188	1,375	706	835	506	325													
FY '00	3,732	3,207	1,438	722	766	646	426													
FY '01	3,771	3,145	1,438	729	761	676	384													

 Between FY 1995 and FY 2001, admissions reporting crack use have remained steady, while alcohol, marijuana, cocaine, and heroin use have increased by 31%, 55%, 55%, and 247%, respectively.

Heroin and Injection Drug Use:

Figure 1 below shows the proportional increases in all admissions in the Berkshire, Hampden, Hampshire, and Franklin Senatorial District and the proportional increase in admissions reporting heroin and injection drug use, a factor driving increases in HIV¹.



• Total treatment admissions for all modalities rose 41% between FY 1995 and FY 2001. During the same period, admissions for heroin and injection drug use treatment increased by 221%.

Primary Substance of Use:

At admission clients also identify a "primary drug" of use which is the substance currently causing them the most problems.

• Table 2 compares the proportional distribution of primary drugs in Massachusetts with that for the Berkshire, Hampden, Hampshire, and Franklin Senatorial District.

Table 2									
Primary Drug by District and State FY 2001									
	Alcohol	Heroin	Marijuana	Cocaine	Crack				
District	63.8%	13.4%	9.7%	2.1%	7.1%				
State	46.5%	35.9%	6.5%	3.9%	3.4%				

• While heroin and cocaine as a primary drug of use in your Senatorial District was lower than the State, alcohol, marijuana, and crack as a primary drug was higher within your District.

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¹ The Schneider Institute for Health Policy, Brandeis University, 2000